Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	45	filing fee	
\$7	75	administrative fee	
+ \$	15	trustee surcharge	
\$3	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this infor	rmation to identify your	case:		
Debtor 1	Robert Nelson Ma	artin		
	First Name	Middle Name	Last Name	
Debtor 2	Mary Alondra Ma	rtin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number	18-17003			
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	77,879.25
	1c. Copy line 63, Total of all property on Schedule A/B	\$	77,879.25
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,693.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	238,462.52
	Your total liabilities	\$	264,155.52
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,653.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,651.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	chedules.
7.	Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Robert Nelson Martin
Debtor 2 Mary Alondra Martin

Case number (if known) 18-17003

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,224.91

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	202,458.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	202,458.00

		ify your case a	nd this filing:		
Fill in	this information to ident	ily your case ai			
Debtor	r 1 Robert Ne	Ison Martin			
Dobto	First Name		Middle Name Last Name		
Debtor (Spouse,		dra Martin	Middle Name Last Name		
United	d States Bankruptcy Court	for the: DISTR	RICT OF NEVADA		
_					_
Case r	number <u>18-17003</u>				☐ Check if this is an amended filing
					J. T. T. T. J.
∩ffic	cial Form 106A	/R			
_					
	nedule A/B: F		List an asset only once. If an asset fits in more than o	Paral	12/15
nformat	ation. If more space is neede every question.	d, attach a separa	essible. If two married people are filing together, both a late sheet to this form. On the top of any additional page or Other Real Estate You Own or Have an Interest In		
. во ус	ou own or nave any legal or	equitable interes	st in any residence, building, land, or similar property?		
■ No	lo. Go to Part 2.				
☐ Ye	es. Where is the property?				
Part 2:	Describe Your Vehicles				
Do you someor		a vehicle, also	interest in any vehicles, whether they are registoreport it on Schedule G: Executory Contracts and Unicles, motorcycles		ehicles you own that
Do you someor	ne else drives. If you leases, vans, trucks, tractors,	a vehicle, also	report it on Schedule G: Executory Contracts and L		ehicles you own that
Do you comeon 3. Cars \(\sum \) No \(\sum \) Yo	ne else drives. If you leases, vans, trucks, tractors,	a vehicle, also	report it on Schedule G: Executory Contracts and L	Jnexpired Leases. Do not deduct secured cl	aims or exemptions. Put
Do you someon 3. Cars No	ne else drives. If you lease s, vans, trucks, tractors, lo 'es	a vehicle, also	report it on Schedule G: Executory Contracts and L	Jnexpired Leases.	aims or exemptions. Put
Do you someon 3. Cars No Ye 3.1	ne else drives. If you lease s, vans, trucks, tractors, lo 'es Make: Mini	a vehicle, also	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure	aims or exemptions. Put
Do you someor 3. Cars 1. No 1. Yes	ne else drives. If you lease s, vans, trucks, tractors, lo 'es Make: Mini Model: Cooper Year: 2010 Approximate mileage:	a vehicle, also	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.
Do you someor 3. Cars V	ne else drives. If you lease s, vans, trucks, tractors, lo 'es Make: Mini Model: Cooper Year: 2010 Approximate mileage: Other information:	a vehicle, also	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the
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Do you someon 3. Cars Yes	ne else drives. If you lease s, vans, trucks, tractors, lo 'es Make: Mini Model: Cooper Year: 2010 Approximate mileage: Other information:	a vehicle, also	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$3,230.00	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$3,230.00
3.1 Oo you someor 3. Cars Ye 3.1	ne else drives. If you lease s, vans, trucks, tractors, lo res Make: Mini Model: Cooper Year: 2010 Approximate mileage: Other information: Surrendering Make: VW Model: Passat	a vehicle, also	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$3,230.00	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$3,230.00 aims or exemptions. Put ad claims on Schedule D:
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Official Form 106A/B Schedule A/B: Property page 1

	ebtor 1 ebtor 2	Robert Nelson Mary Alondra		Case number (if known)	18-17003
5			e portion you own for all of your entries from Part for Part 2. Write that number here		\$9,436.00
Pa	rt 3: Des	scribe Your Persona	I and Household Items		
			al or equitable interest in any of the following item	ns?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and fur es: Major appliance	nishings es, furniture, linens, china, kitchenware		dumo di exemptione.
	Yes.	Describe			
_			Household Goods		\$400.00
7.	■ No	es: Televisions and	radios; audio, video, stereo, and digital equipment; conones, cameras, media players, games	omputers, printers, scanners; music c	ollections; electronic devices
8.	Example No		gurines; paintings, prints, or other artwork; books, pictus, memorabilia, collectibles	ures, or other art objects; stamp, coin,	or baseball card collections;
9.	Example No	ent for sports and es: Sports, photogramusical instrum Describe	aphic, exercise, and other hobby equipment; bicycles,	pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
10.	■ No		shotguns, ammunition, and related equipment		
11.	□ No ´		nes, furs, leather coats, designer wear, shoes, accesso	ories	
			Clothing		\$100.00
12.	□ No	les: Everyday jewe	elry, costume jewelry, engagement rings, wedding ring	s, heirloom jewelry, watches, gems, g	
			wedding rings		\$1,000.00
13.	Examp ■ No	rm animals bles: Dogs, cats, bir Describe	ds, horses		
14.	■ No	ner personal and I	household items you did not already list, including	g any health aids you did not list	

Schedule A/B: Property

Debtor Debtor			Case number (if know	n) 18-17003
			Part 3, including any entries for pages you have attached	\$1,500.00
Part 4:	Describe Your Financia	Il Assets		
Do you	own or have any leg	al or equitable interest i	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	<i>amples:</i> Money you ha lo	ve in your wallet, in your h	nome, in a safe deposit box, and on hand when you file your pe	tition
	institutions. If		counts; certificates of deposit; shares in credit unions, brokerages with the same institution, list each.	e houses, and other similar
	es		Institution name:	
		17.1. Checking	Nevada State Bank - #3333 OPEN 10/12/2018	\$50.00
19. No r	es	Institution or issue	r name: porated and unincorporated businesses, including an inter	est in an LLC, partnership, and
■ N	lo	mation about them Name of entity:	 % of ownership:	
Ne No	egotiable instruments in on-negotiable instrumer	clude personal checks, ca	otiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
■ N □ Y	lo 'es. Give specific inform	nation about them Issuer name:		
	•		403(b), thrift savings accounts, or other pension or profit-sharing	ng plans
■ Y	es. List each account s	separately. Type of account:	Institution name:	
		401(k)	TIAA CREF	\$66,893.25
You Exa	amples: Agreements w	deposits you have made s	so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications comp	panies, or others
■ N □ Y	lo ′es		Institution name or individual:	
_	`	a periodic payment of mor	ney to you, either for life or for a number of years)	
■ N □ Y		er name and description.		

 $24. \ \textbf{Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.}$

Schedule A/B: Property

Official Form 106A/B

	ebtor 1 ebtor 2	Robert Nelson Martin Mary Alondra Martin	Case number (if known)	18-17003
	26 U.S.0	C. §§ 530(b)(1), 529A(b), and 529(b)(1).		
	■ No			
	☐ Yes	Institution name and description. Separately file the records of a	any interests.11 U.S.C. § 521(c):	
25.	■ No	equitable or future interests in property (other than anything listed in lin	e 1), and rights or powers exe	rcisable for your benefit
	☐ Yes.	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and other intellectual property oles: Internet domain names, websites, proceeds from royalties and licensing a	ngreements	
	☐ Yes.	Give specific information about them		
	Examp ■ No	es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association holdings, liqu	uor licenses, professional license	es
	⊔ Yes.	Give specific information about them		
M	oney or _l	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	□No			
	Yes.	Give specific information about them, including whether you already filed the re	eturns and the tax years	
		2018 Taxes	Federal	\$0.00
				-
29.		support oles: Past due or lump sum alimony, spousal support, child support, maintenan	nce, divorce settlement, property	settlement
	_	Give specific information		
	□ 163.	Oive specific information		
30.	Examp	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits, sick pay, benefits; unpaid loans you made to someone else	, vacation pay, workers' compen	sation, Social Security
	■ No	Cive energific information		
	☐ Yes.	Give specific information		
31.		ts in insurance policies oles: Health, disability, or life insurance; health savings account (HSA); credit, I	homeowner's, or renter's insuran	ce
		Name the insurance company of each policy and list its value.		
			Beneficiary:	Surrender or refund value:
32.	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy ne has died.	y, or are currently entitled to rece	ive property because
	■ No □ Ves	Give specific information		
	□ 1€5.	One specific information.		
33.	_Examp	against third parties, whether or not you have filed a lawsuit or made a coles: Accidents, employment disputes, insurance claims, or rights to sue	demand for payment	
	■ No	Describe and date		
	⊔ Yes.	Describe each claim		

1/03/19 1:52PM

Debtor 1 Debtor 2	Robert Nelson Martin Mary Alondra Martin		Case number (if known)	18-17003
34. Other	contingent and unliquidated claims of every nature, inclu	uding counterclaims o	f the debtor and rights to	set off claims
■ No				
☐ Yes.	Describe each claim			
35. Any fi i	nancial assets you did not already list			
■ No				
☐ Yes.	Give specific information			
	the dollar value of all of your entries from Part 4, includir art 4. Write that number here		es you have attached	\$66,943.25
Part 5: De	escribe Any Business-Related Property You Own or Have an Inte	rest In. List any real estat	e in Part 1.	
37. Do you	own or have any legal or equitable interest in any business-relat	ed property?		
No. G	o to Part 6.			
☐ Yes. (Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	ມ Own or Have an Interest	t In.	
46. Do yo i	u own or have any legal or equitable interest in any farm-	or commercial fishing	g-related property?	
■ No.	Go to Part 7.			
☐ Yes	s. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
Exam	u have other property of any kind you did not already list ples: Season tickets, country club membership	?		
■ No				
⊔ Yes.	Give specific information			
54. Add	the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$0.00
56. Part	2: Total vehicles, line 5	\$9,436.00		· · ·
57. Part	3: Total personal and household items, line 15	\$1,500.00		
58. Part	4: Total financial assets, line 36	\$66,943.25		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54 +	\$0.00		
62. Total	personal property. Add lines 56 through 61	\$77,879.25	Copy personal property to	otal \$77,879.25
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$77,879.25

Official Form 106A/B Schedule A/B: Property page 5

Fill in this inform	mation to identify your	case:			
Debtor 1	Robert Nelson Ma	artin			
	First Name	Middle Name	Last Name		
Debtor 2	Mary Alondra Mai	rtin			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA			
Case number	18-17003				
(if known)	10 17000			_	heck if this is a

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	-	-		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household Goods Line from Schedule A/B: 6.1	\$400.00		\$400.00	Idaho Code § 11-605(1)(a)
			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$100.00		\$100.00	Idaho Code § 11-605(1)(b)
Line from Scriedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
wedding rings Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	Idaho Code § 11-605(2)
			100% of fair market value, up to any applicable statutory limit	
Checking: Nevada State Bank - #3333 OPEN 10/12/2018	\$50.00		\$50.00	Idaho Code § 11-605(10)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
401(k): TIAA CREF Line from Schedule A/B: 21.1	\$66,893.25		\$66,893.25	Idaho Code §§ 55-1011, 11-604A
Eine Hein Genedale 74B. 2111			100% of fair market value, up to any applicable statutory limit	007/1

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Debtor 1 Debtor 2	Robert Nelson Martin Mary Alondra Martin			Case number (if known)	18-17003
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one	box for each exemption.	
	deral: 2018 Taxes from Schedule A/B: 28.1	\$0.00		\$0.00	Idaho Code § 11-605(10)
LIIR	TIOTH Suredule A/D. 20.1			fair market value, up to cable statutory limit	
	you claiming a homestead exemption bject to adjustment on 4/01/19 and every No			fter the date of adjustmen	t.)
	Yes. Did you acquire the property cover	ed by the exemption wi	thin 1,215 days b	pefore you filed this case?)
	□ No				
	☐ Yes				

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				1/03/19 1:52PM
Fill in this information to identify you	r case:			
Debtor 1 Robert Nelson I	Martin			
First Name	Middle Name Last Name			
Debtor 2 Mary Alondra M				
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the:	DISTRICT OF NEVADA			
Case number 18-17003				
(if known)			☐ Check	if this is an
			amend	led filing
Official Form 106D				
	VAII	l lass Davida a sasta		
Schedule D: Creditors	Who Have Claims Secured	by Propert	<u>y </u>	12/15
	If two married people are filing together, both are eq out, number the entries, and attach it to this form. Or			
1. Do any creditors have claims secured by	your property?			
\square No. Check this box and submit the	nis form to the court with your other schedules. You	ou have nothing else to	o report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor has	a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 CarMax Auto Finance	Describe the property that secures the claim:	\$12,694.00	\$3,230.00	\$9,464.00
Creditor's Name	2010 Mini Cooper 80000 miles Surrendering			
Attn: Bankruptcy	As of the date you file, the claim is: Check all that			
Po Box 440609	apply.			
Kennesaw, GA 30160	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
■ Check if this claim relates to a community debt	Other (including a right to offset)			
•				
Opened 07/18 Last				
Active				
Date debt was incurred 10/13/18	Last 4 digits of account number 6948			
2.2 Santander Consumer	Describe the average that accuracy the claims	\$12,999.00	\$6,206.00	\$6,793.00
Creditor's Name	Describe the property that secures the claim: 2013 VW Passat 77000 miles	Ψ12,000.00	Ψο,Σοσ.σσ	Ψο,7 σσ.σσ
	2013 VW Fassat 77000 IIIIles			
Po Box 961275	As of the date you file, the claim is: Check all that apply.			
Fort Worth, TX 76161	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed			
_	Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec	urod		
Debtor 1 only	car loan)	ured		
■ Debtor 2 only □ Debtor 1 and Debtor 2 only				
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	— 523gmon nom a lawoun			

Official Form 106D

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1/03/19 1·52P	м

Debtor 1	Robert Nelson Martin			Case number (if known)	18-17003	
	First Name	Middle Name	Last Name	_		
Debtor 2	Mary Alon	dra Martin				
	First Name	Middle Name	Last Name	<u> </u>		
	if this claim re unity debt	lates to a	ther (including a right to offset)	Auto		
Date debt	was incurred	Opened 07/17 Last Active 10/28/18	Last 4 digits of account num	ber <u>10</u> 0	00	
If this is		of your form, add the dol	A on this page. Write that nun llar value totals from all pages		\$25,693 \$25,693	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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										1/03/	/19 1:52PM
Filli	n this info	rmation to identify your c	ase:								
Deb	tor 1	Robert Nelson Ma	rtin								
		First Name	Middle	Name	Last Name						
	tor 2	Mary Alondra Mar									
(Spou	ise if, filing)	First Name	Middle	Name	Last Name						
Unite	ed States E	Bankruptcy Court for the:	DISTRICT	OF NEVADA							
Case	e number	18-17003									
(if kno		10-17003		_				Ιп	Check i	f this is an	1
								_	amende	ed filing	
٠«.		400E/E									
		<u>m 106E/F</u>								40/45	
		E/F: Creditors W								12/15	
any e Sched Sched left. A	xecutory co dule G: Exec dule D: Crec ttach the Co and case n	and accurate as possible. Use intracts or unexpired leases to cutory Contracts and Unexpiral fitors Who Have Claims Secu- ontinuation Page to this page umber (if known). All of Your PRIORITY Uns	that could re red Leases (ıred by Prop e. If you have	sult in a claim. Official Form 10 erty. If more spa e no information	Also list executory con 6G). Do not include an ace is needed, copy the	ntracts on S ny creditors e Part you no	chedule A/B: I with partially seed, fill it out,	Property (Of secured clain number the	ficial Forr ms that an entries in	n 106A/B) a re listed in the boxes	on the
1. [Do any cred	itors have priority unsecured	l claims agai	nst you?							
I	☐ No. Go to	Part 2.									
I	Yes.										
r F	oossible, list Part 1. If mor	type of claim it is. If a claim has the claims in alphabetical order e than one creditor holds a par anation of each type of claim, so	r according to ticular claim,	the creditor's na list the other cred	ime. If you have more the ditors in Part 3.	nan two priorit let.)					e of
2.1	kristi	soto		Last 4 digits of	account number		\$0.00		\$0.00		\$0.00
	Priority (Creditor's Name	,	When was the d	lebt incurred?			-	<u> </u>		
	Number	Street City State Zlp Code		As of the date y	ou file, the claim is: Cl	heck all that a	apply				
	Who incur	red the debt? Check one.		☐ Contingent							
	Debtor 1	1 only		☐ Unliquidated							
	Debtor 2	2 only		☐ Disputed							
	■ Debtor 1	1 and Debtor 2 only		·	TY unsecured claim:						
	_	one of the debtors and another	r	Domestic sur	port obligations						
	_			_	rtain other debts you ov	ve the govern	ment				
		f this claim is for a commun n subject to offset?	ity dobt		ath or personal injury wl	•					
	No	i subject to onset?		Other. Specify	. , , ,	, , , , , ,					
	Yes			_ 0 0 0	,						
Part		All of Your NONPRIORITY									
		itors have nonpriority unsec		-							
[☐ No. You h	nave nothing to report in this pa	art. Submit thi	s form to the cou	rt with your other sched	ules.					
I	Yes.										
t t	unsecured cl	our nonpriority unsecured cla aim, list the creditor separately ditor holds a particular claim, lis	for each clair	m. For each claim	n listed, identify what typ	e of claim it i	s. Do not list cl	aims already	included i	n Part 1. Íf r	

Total claim

Debtor Debtor	1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003				
4.1	ABM Parking Services Spokane	Last 4 digits of account number	1514	\$46.00			
	Nonpriority Creditor's Name PO Box 2052 Tarrytown, NY 10591	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	■ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
4.2	Alphera Financial Serv Nonpriority Creditor's Name	Last 4 digits of account number	7330	\$17,228.00			
	Attn: Bankruptcy Po Box 3608	When was the debt incurred?	Opened 09/13 Last Active 5/03/15				
	Dublin, OH 43016 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another ☐ Disputed ☐ Disputed ☐ Disputed ☐ Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	□Yes	■ Other. Specify Automobile	9				
4.3	Bank Of America	Last 4 digits of account number	75	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 982238 EL Boso TX 70008	When was the debt incurred?	Opened 03/07 Last Active 10/08				
	El Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only □ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans ☐ Type of NONPRIORITY unsecured claim: ☐ Student loans						
	debt	debt ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	a plane, and other similar delete				
	■ No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Check Cree	ait Or Line Of Gredit				

Debtor Debtor	1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003			
4.4	Barclays Bank Delaware	Last 4 digits of account number	0107	\$0.00		
	Nonpriority Creditor's Name Attn: Correspondence Po Box 8801 Wilmington, DE 19899 Number Street City State Zlp Code	Opened 04/03 Last Active 01/04 As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	• •				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				
4.5	Capital One	Last 4 digits of account number	0667	\$1,619.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 24420	When was the debt incurred?	Opened 01/17 Last Active 11/18			
-	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Пол				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
		☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3236	\$760.00		
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 10/17 Last Active 10/18			
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	d claim:				
	☐ Check if this claim is for a community					
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plans, and other similar debts			
		·				
	☐ Yes	Other. Specify Credit Card	<u> </u>			

	1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003			
4.7	Capital One	Last 4 digits of account number	9718	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/11 Last Active 02/14			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only					
	Debtor 2 only	☐ Contingent				
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated				
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d alaim.			
	_	Student loans	a ciaim:			
	■ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	1			
4.8	Capital One / Comp U Nonpriority Creditor's Name	Last 4 digits of account number	7375	\$0.00		
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/03 Last Active 07/05			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	\square At least one of the debtors and another	d claim:				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	 Obligations arising out of a separe report as priority claims 	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts			
	Yes					
4.9	Citibank/The Home Depot	Last 4 digits of account number	4865	\$700.00		
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 06/14 Last Active 10/22/14			
	St Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Пол				
	Debtor 2 only	☐ Contingent☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Charge Ac	count			

Debtor 1 Debtor 2	Robert Nelson Martin Mary Alondra Martin	Case number (if known) 18-17003				
U	Citicards	Last 4 digits of account number	4663	\$0.00		
	Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code	When was the debt incurred?	Opened 04/02 Last Active 09/07			
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан тлат аррну			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims				
	No	Debts to pension or profit-sharin	a plane, and other similar debts			
		·				
	Yes	Other. Specify				
	Comenity Bank/Pier 1 Nonpriority Creditor's Name	Last 4 digits of account number	1682	\$593.00		
•	Attn: Bankruptcy Dept Po Box 182125 When was the debt incurred? Columbus, OH 43218		Opened 10/17 Last Active 10/18			
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured				
	Check if this claim is for a community	Student loans				
1	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	No	☐ Debts to pension or profit-sharin				
	Yes	■ Other. Specify Charge Acc	count			
I - I	Credit Acceptance Nonpriority Creditor's Name	Last 4 digits of account number	0995	\$0.00		
	25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034	When was the debt incurred?	Opened 10/15 Last Active 1/26/18			
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed	L.L.			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:			
•	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	— No □ Yes	Other. Specify Automobile	• •			
		— Other. Specify				

Debtor 2	Robert Nelson Martin Mary Alondra Martin		Case number (if known) 18-17003	
1 U	Credit Acceptance	Last 4 digits of account number	8696	\$0.00
	Nonpriority Creditor's Name 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034	When was the debt incurred?	Opened 08/15 Last Active 7/21/17	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
	Dermatology Specialists of Spokane	Last 4 digits of account number	2474	\$148.15
	Nonpriority Creditor's Name 510 S Cowley St Suite 200 Spokane, WA 99202	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1 5	Dollar Loan Center Nonpriority Creditor's Name	Last 4 digits of account number	2201	\$1,027.00
	Attn: Bankruptcy 8860 West Sunset Road Las Vegas, NV 89148	When was the debt incurred?	Opened 10/04/18 Last Active 10/12/18	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	· ,	
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify		

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Robert Nelson Martin 18-17003 Debtor 2 Mary Alondra Martin Case number (if known) 4.1 3206 \$293.00 Eastern Washington University Last 4 digits of account number 6 Nonpriority Creditor's Name 319 Showalter Hall When was the debt incurred? Cheney, WA 99004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify FedLoan Servicing 0002 \$202,458.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/13 Last Active Po Box 69184 When was the debt incurred? 10/18 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated ■ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 FREMONT EMERGENCY SERVICES \$1,360,00 2302 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 740023 When was the debt incurred? Cincinnati. OH 45274 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ■ Check if this claim is for a community ☐ Student loans \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Official Form 106 E/F

☐ Yes

Other. Specify

Medical

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Robert Nelson Martin 18-17003 Debtor 2 Mary Alondra Martin Case number (if known) 4.1 4PBC \$132.45 Godwin Acupuncture Last 4 digits of account number 9 Nonpriority Creditor's Name 1625 W 4th Avenue When was the debt incurred? Spokane, WA 99201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Incyte Pathology, INC 0263 \$30.52 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3495 When was the debt incurred? Toledo, OH 43607 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify *Medical* 4.2 Inland Northwest Anesthesia 5985 \$196.74 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1002 N Spokane St Post Falls, ID 83854 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify *Medical* ☐ Yes

Official Form 106 E/F

Debtor 2	Robert Nelson Martin Mary Alondra Martin		Case number (if known)	18-17003	
4.2	Interpath Laboratory	Last 4 digits of account number	6286		\$9.09
	Nonpriority Creditor's Name 2460 SW Perkins Ave PO BOX 1208 Pendleton, OR 97801	When was the debt incurred?			
=	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separations	aration agreement or divorce	e that you did not	
	Is the claim subject to offset?	report as priority claims	aration agroomont or arvoros	that you are not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	Yes	Other. Specify Medical			
4.2	IRS	Last 4 digits of account number			\$5,095.52
<u> </u>	Nonpriority Creditor's Name Centralized Insolvency Operation	When was the debt incurred?			
	Po Box 7346 Philadelphia, PA 19101 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	7.0 00 44.0 7040,0 0.4	ioi onock an mat apply		
	Debtor 1 only	O continuent			
	Debtor 2 only	☐ Contingent			
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated			
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans	a ciaiii.		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	e that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	Yes	■ Other. Specify 2014, 2015	, 2016, 2017 TAXES		
-	Kohls/Capital One	Last 4 digits of account number	0648		\$415.00
	Nonpriority Creditor's Name Kohls Credit Po Box 3120	When was the debt incurred?	Opened 08/17 Las 08/18	t Active	
-	Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	· ·	·	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	Yes	■ Other. Specify Charge Ac	count		

Debtor Debtor	1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003	
4.2 5	Kohls/Capital One	Last 4 digits of account number	4152	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 02/07 Last Active 09/07	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.2	Laboratory Medicine Consultants LTD	Last 4 digits of account number	6369	\$58.00
	Nonpriority Creditor's Name File 749203	When was the debt incurred?		
	Los Angeles, CA 90074 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Bi	<u> </u>	
4.2	Laboratory Medicine Consultants LTD	Last 4 digits of account number	3692	\$240.00
	Nonpriority Creditor's Name File 749203 Los Angeles, CA 90074	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	■ Other. Specify Medical Bi	- '	
	— 163	Utner. Specify		

1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003	
Navient	Last 4 digits of account number	1221	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773	When was the debt incurred?	Opened 12/01 Last Active 06/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Government	nt Unsecured Guarantee Loan	
Navient	Last 4 digits of account number	0113	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9000	When was the debt incurred?	Opened 01/06 Last Active 2/13/13	
Wiles-Barr, PA 18773	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
_			
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al	
Progressive Leasing Nonpriority Creditor's Name	Last 4 digits of account number	8078	\$1,578.00
256 West Data Dr Draper, UT 84020	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify		

² Mary Alondra Martin		Case number (if known)	18-17003	
Providence Health & Services	Last 4 digits of account number	4539		\$36.
Nonpriority Creditor's Name PO BOX 3177	When was the debt incurred?			
Portland, OR 97208 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	,	ar chicon an mar apply		
☐ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
■ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
Yes	Other. Specify Medical			
Southern Hills Hospital	Last 4 digits of account number	6369		\$1,171.2
Nonpriority Creditor's Name	_			
Po Box 740766	When was the debt incurred?			
Cincinnati, OH 45274 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	,			
☐ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
■ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
Yes	Other. Specify Medical			
Syncb/Care Credit	Last 4 digits of account number	1756		\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 02/04 Las 12/04	t Active	
Orlando, FL 32896				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	Пол			
Debtor 2 only	☐ Contingent			
_	☐ Unliquidated☐ Disputed			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans	-		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
No	Debts to pension or profit-sharin	a plans, and other similar de	ebts	
— INO	200.0 to policion of profit offallif	oriano, and other similar de		

Nonpriority Creditor's Name Atthr: Bankruptcy Dept Po Box 965060 Orlando, FI 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? The Doctors Clinic of Spokane P S Nonpriority Creditor's Name 220 E Rowan STE 300 Spokane, WA 99207 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Spokane Wa 99207 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Spokane Wa 1 and Debtor 2 only Debtor 1 only Spokane Wa 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State claim subject to offset? No Debtor 1 only Contingent Disputed Disputed Disputed Type of NoNPRIORITY unsecured claim: Contingent Unliquidated Disputed Disputed Debtor 1 only Contingent Unliquidated Disputed Disputed Student loans Disputed Student loans Disputed Disputed Disputed Student loans Disputed Di	Debto Debto			Case number (if known)	18-17003	
Attr: Bankruptcy Dept Po Box 965060 Orlando, Ft. 32896 Number Street City State 2 Dode Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Orlando, Ft. 32896 Number Street City State 2 Dode Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Orlando, Ft. 32896 Number Street City State 2 Dode Who incurred the debt or sand another Orlando, Ft. 32896 Normonity Creditor's Name 220 E Rowan STE 300 Spokane, MA 39207 Number State City State 2 Dode Who incurred the debtr Check one. Debtor 1 only Debtor 1 only Debtor 2 only Orlando, Ft. 32896 Normonity Creditor's Name Check if this claim is for a community debt Is the claim subject to offset? Normonity Creditor's Name Check if this claim is for a community debt Is the claim subject to offset? Normonity Creditor's Name Check if this claim is for a community debt Is the claim subject to offset? Normonity Creditor's Name Attr: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State 2 Dode Who incurred the debtor 2 only Debtor 1 and Lebsor 2 only Debtor 1 and Lebsor 2 only Debtor 1 only Debtor 1 only Contragent Corter, Specify Medical Last 4 digits of account number Opened 8/17/07 Last Active 201/13 As of the date you file, the claim is: Check all thut apply Who incurred the debtr Check one. Debtor 1 only Contragent Corter, Specify Medical Last 4 digits of account number Opened 8/17/07 Last Active 201/13 As of the date you file, the claim is: Check all thut apply Who incurred the debtr Check one. Debtor 1 only Corters Specify Debtor 1 and Debtor 2 only Corters Specify Debtor 1 and Debtor 2 only Corters Specify Debtor 1 and Debtor 2 only Corters Specify Corter Specify Debtor 1 and Debtor 2 only Corters Specify Corter Specify Co		-	Last 4 digits of account number	0194		\$0.00
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 is the dealin subject to offset? Debtor 1 is the claim subject to offset? Debtor 5 Clinic of Spokane P S Sociane, WA 99207 Number 5 Servic Chys Siane 2D; Code Who incurred the debtr? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1		Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?		t Active	
Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 Mane Debtor 4 Mane Debtor 3 Mane Debtor 4 Mane Debtor 5 Mane Debtor 4 Mane Debtor 4 Mane Debtor 5 Mane Debtor 6 Mane Debtor 7 Mane Debtor 6 Mane Debtor 7 Mane Debtor 7 Mane Debtor 6 Mane Debtor 8 Mane Debtor 9 Mane Debtor 8 Mane Debtor 8 Mane Debtor 9 Mane D			As of the date you file, the claim	is: Check all that apply		
Debtor 1 and Debtor 2 only		Debtor 1 only	☐ Contingent			
At least one of the debtors and another Check if this claim is for a community debt Student loans Check if this claim subject to offset? Soudent loans Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community of claim Check if this claim is for a community of check one. Check if this claim is for a community of the claim subject to offset? Check one. Check if this claim is for a community of this claim is for		Debtor 2 only	☐ Unliquidated			
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only		☐ Debtor 1 and Debtor 2 only	☐ Disputed			
Collegations arising out of a separation agreement or divorce that you did not report as priority claims Non-		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
Is the claim subject to offset? report as priority claims No		☐ Check if this claim is for a community	☐ Student loans			
The Doctors Clinic of Spokane P S Nonpriority Creditors Name 220 E Rowan STE 300 Spokane, WA 99207 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 to a spokane, we will be claim subject to offset? No				aration agreement or divorce	that you did not	
The Doctors Clinic of Spokane P S Nonpriority Creditor's Name 220 E Rowan STE 300 Spokane, WA 99207 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 4 this claim is for a community debt Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 this claim is for a community debt Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1		■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Support Sum		Yes	Other. Specify			
220 E Rowan STE 300 Spokane, WA 99207 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Disputed Type of NONPRIORITY unsecured claim: Opened 8/17/07 Last Active Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Disputed Student loans Student lo		-	Last 4 digits of account number	7936		\$36.49
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debtors and another Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 community Debtor 6 community Debtor 6 community Debtor 6 community Debtor 7 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 6 community Debtor 1 only Debtor 2 only Debtor 3 only Debtor 6 community Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 6 community Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 6 community Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 4 only Debtor 5 only Debtor 6 community Debtor 6 community Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 6 only Debtor 1 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only		220 E Rowan STE 300	When was the debt incurred?			
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Other. Specify Wedical US Dept of Education Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 this claim is for a community debt Student loans Student loans Opened 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Dolligations arising out of a separation agreement or divorce that you did not report as priority claims		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Last 4 digits of account number 4799 \$0. As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debts 1 and Debtor 2 only Debts 2 only Debts 1 and Debtor 3 only Debts 2 only Debts 3 feeck if this claim is for a community debt Is the claim subject to offset? Debts 1 only Debts 3 feeck if this claim is for a community debt Is the claim subject to offset? Debts 2 only Debts 3 feeck if this claim is for a community debt Is the claim subject to offset?		_	_			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only No Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?						
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim subject to offset? Contingent Check if this claim is for a community debt Check if this claim subject to offset?		<u> </u>	·			
Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify Medical US Dept of Education Nonpriority Creditor's Name Attr: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<u> </u>				
Check if this claim is to a community debt St the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Medical		<u></u>		d claim:		
Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Last 4 digits of account number 4799 \$0. Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Medical 4799 \$0. Opened 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		debt	Obligations arising out of a sepa	aration agreement or divorce	that you did not	
US Dept of Education Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number 4799 \$0. Opened 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		•		og plane, and other similar de	ahte	
US Dept of Education Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number 4799 When was the debt incurred? Opened 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Last 4 digits of account number 4799 Opened 8/17/07 Last Active 2/01/13 Opened				ig pians, and other similar de	5013	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number 4799 Depend 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply When was the debt incurred? 2/01/13 As of the date you file, the claim is: Check all that apply Unliquidated Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Opened 8/17/07 Last Active 2/01/13 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Debtor 1 only Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		•	Last 4 digits of account number	4799		\$0.00
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Attn: Bankruptcy Po Box 16448	When was the debt incurred?	_	ast Active	
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ sthe claim subject to offset? □ Contingent □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			As of the date you file, the claim	is: Check all that apply		
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Debtor 1 only	☐ Contingent			
Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Debtor 2 only	☐ Unliquidated			
☐ Check if this claim is for a community debt ☐ Check if this claim subject to offset? ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		☐ Debtor 1 and Debtor 2 only	•			
debt		\square At least one of the debtors and another	<u></u>	d claim:		
Is the claim subject to offset? report as priority claims			Student loans			
■ No □ Debts to pension or profit-sharing plans, and other similar debts		Is the claim subject to offset?	report as priority claims	· ·	•	
		■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
☐ Yes ☐ Other. Specify		Yes	Other. Specify			

1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003	
US Dept of Education	Last 4 digits of account number	4899	\$0.00
Nonpriority Creditor's Name		Opened 8/18/09 Last Active	
Po Box 5609 Greenville, TX 75403	When was the debt incurred?	2/01/13	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al	
US Dept of Education	Last 4 digits of account number	4999	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/13/10 Last Active 2/01/13	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al	
US Dept of Education Nonpriority Creditor's Name	Last 4 digits of account number	5099	\$0.0
Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/19/11 Last Active 2/01/13	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		

Debtor 1 Robert Nelson Martin Debtor 2 Mary Alondra Martin		Case number (if known) 18-17003	
US Dept of Education	Last 4 digits of account number	5199	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/17/07 Last Active 2/01/13	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
	Educationa	nl	
US Dept of Education	Last 4 digits of account number	5299	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 9/03/08 Last Active 2/01/13	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al .	
US Dept of Education	Last 4 digits of account number	5399	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/18/09 Last Active 2/01/13	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		

Debtor Debtor	1 Robert Nelson Martin 2 Mary Alondra Martin		Case number (if known) 18-17003	
4.4	US Dept of Education	Last 4 digits of account number	5499	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/13/10 Last Active 2/01/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecuree	d claim:	
	☐ Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	· ·	
	Yes	Other. Specify		
		Educationa	nl .	
4.4	US Dept of Education	Last 4 digits of account number	5599	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/19/11 Last Active 2/01/13	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Educationa		
4.4 5	US Dept of Education	Last 4 digits of account number	2916	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116	When was the debt incurred?	Opened 8/17/07 Last Active 9/30/11	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Little	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	1	

Debtoi Debtoi	71 Robert Nelson Martin 72 Mary Alondra Martin		Case number (if known) 18-17003	
4.4 6	Verizon	Last 4 digits of account number		\$900.00
	Nonpriority Creditor's Name Po Box 660108	When was the debt incurred?		
	Dallas, TX 75266 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other Specify Wireless P	hone Bill	
4.4 7	Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	8730	\$0.00
	Attn: Bankruptcy		Opened 12/07 Last Active	
	Po Box 8053	When was the debt incurred?	08/08	
	Mason, OH 45040 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	or o	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4 8	Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	7820	\$0.00
	Attn: Bankruptcy Po Box 8053 Mason, OH 45040	When was the debt incurred?	Opened 07/07 Last Active 8/29/08	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	• •	
	Yes	■ Other. Specify Charge Acc	count	

Debtor 2		lelson Martin ondra Martin		Case nu	mber (if known) 18-17003	
4.4	Wells Farg		Last 4 digits of account number	7138		\$2,331.00
	Nonpriority Cre Attn: Bank Po Box 642 Greenville,	ruptcy Dept 29	When was the debt incurred?	Open 6/25/1	ed 11/11 Last Active 17	-
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply	
	Debtor 1 or	nly	☐ Contingent			
	Debtor 2 or	nly	☐ Unliquidated			
	Debtor 1 ar	nd Debtor 2 only	☐ Disputed			
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if th	is claim is for a community	☐ Student loans			
	debt	ubject to offset?	Obligations arising out of a separeport as priority claims	aration agi	reement or divorce that you did not	
	■ No		Debts to pension or profit-sharing	ıg plans, a	and other similar debts	
	☐ Yes		Other. Specify Credit Card	1		-
4.5	_	o Dealer Services	Last 4 digits of account number	8199		\$0.00
	Nonpriority Cre Attn: Bank			Open	ed 04/12 Last Active	
	Po Box 196		When was the debt incurred?	10/14		
	Irvine, CA			: ObI	all that and b	,
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	ан тлат арріу	
	Debtor 1 or		☐ Contingent			
	■ Debtor 2 or		☐ Unliquidated			
	_	nd Debtor 2 only	☐ Disputed			
		e of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
		is claim is for a community	☐ Student loans			
	debt	ubject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agi	reement or divorce that you did not	
	■ No		☐ Debts to pension or profit-sharir	ıg plans, a	and other similar debts	
	Yes		Other Specify Automobile			-
Part 3:	List Other	s to Be Notified About a Deb	t That You Already Listed			_
is tryin have m	ng to collect from	om you for a debt you owe to son	out your bankruptcy, for a debt that y neone else, list the original creditor ir you listed in Parts 1 or 2, list the addi submit this page.	Parts 1	or 2, then list the collection agency	y here. Similarly, if you
	nd Address		On which entry in Part 1 or Part 2 did you		=	
	ss Firm I Division S				Creditors with Priority Unsecured Clai	
_	ne, WA 992		-	Part 2: 0	Creditors with Nonpriority Unsecured	Claims
			ast 4 digits of account number	77	774	
Part 4:	Add the A	mounts for Each Type of Uns	secured Claim			
	he amounts of f unsecured cl		ns. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for each
					Total Claim	
	6a.	Domestic support obligations		6a.	\$	- -
	otal iims					
from Pa		Taxes and certain other debts	you owe the government	6b.	\$0.00	_
	6c.	= = = = = = = = = = = = = = = = = = =	njury while you were intoxicated	6c.	\$ 0.00	_
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$ 0.00	

Official Form 106 E/F

Debtor 1 Robert Nelson Martin Debtor 2 Mary Alondra Martin			Case number (if known)		18-17003	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00	
				Total	Claim	
	6f.	Student loans	6f.	\$	202,458.00	
Total claims						
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	36,004.52	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	238,462.52	

Fill in this infor	mation to identify your	case:						
Debtor 1	Robert Nelson Ma							
	First Name	Middle Name	Last Name					
Debtor 2	Mary Alondra Martin							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA						
Case number	18-17003							
(if known)	<u></u>			☐ Check if this is amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		State	Zii Code	
2.0	Name				_
	Ivallie				
	Number	Street			_
	City		State	ZIP Code	_
2.4	City		State	ZIF Code	
2.4	Name				_
	Number	Street			_
	. 10111001	2001			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

	Case 18-17003-m	ıkn Doc 16	Entered 01/03/1	.9 13:54:38	Page 36 of 52
Fill in this	information to identify your cas	e:			
Debtor 1	Robert Nelson Marti		L(N		
Debtor 2	First Name Mary Alondra Martin	Middle Name	Last Name		
(Spouse if, filin		Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the: D	ISTRICT OF NEVAD	A		
Case numb (if known)	per <u>18-17003</u>				☐ Check if this is an
	Form 106H ule H: Your Codeb	otors			amended filing
ill it out, ar		tes on the left. Attac nswer every question	h the Additional Page to n.	o this page. On th	e is needed, copy the Additional Page, e top of any Additional Pages, write
■ No					
		ad in a community n	roporty state or torritor	u2 (Community pro	anorty atatas and tarritarias include
	a, California, Idaho, Louisiana, Ne				operty states and territories include sin.)
□ No.	Go to line 3.				
Yes	. Did your spouse, former spouse,	or legal equivalent liv	ve with you at the time?		
	■ No				
	□ Yes.				
	In which community state or	territory did you live?	-NONE-	Fill in the nar	ne and current address of that person.
	Name of your spouse, former spouse,				
	Number, Street, City, State & Zip Cod				
in line Form ′	2 again as a codebtor only if the	at person is a guara	ntor or cosigner. Make s	sure you have list	filing with you. List the person showr ed the creditor on Schedule D (Officia e D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP Co	de			e creditor to whom you owe the debt edules that apply:
3.1				_ Schedule [D, line
_ 7	Name			☐ Schedule E	·
-	Niveshau Circari			☐ Schedule (—	ج, iine
	Number Street City S	tate	ZIP Code		
				По	N. P
3.2				_ 🔲 Schedule [J, line

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Street

State

Name

Number City

ZIP Code

☐ Schedule E/F, line ☐ Schedule G, line

Fill in this information t	o identify your case:	
Debtor 1	Robert Nelson Martin	
Debtor 2 (Spouse, if filing)	Mary Alondra Martin	
United States Bankrup	tcy Court for the: DISTRICT OF NEVADA	
Case number [18-	-17003	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form	<u>106I</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	packer	Counselor
	Include part-time, seasonal, or self-employed work.	Employer's name	People Ready	Center for Behaviioral Health
	Occupation may include student or homemaker, if it applies.	Employer's address	565 Marks street #110 Henderson, NV 89014	518 S 9th Street Suite 200 Boise, ID 83702
		How long employed the	here? 2 weeks	started 9/2018

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 1,878.00 \$ 3,496.00

3. +\$ 0.00 +\$ 0.00

4. \$ 1,878.00 \$ 3,496.00

Debt Debt		Robert Nelson Martin Mary Alondra Martin	-	Ca	ase number (if known)	18-	17003		
				F	For Debtor 1		r Debtor n-filing s		
	Сор	y line 4 here	4.	9	1,878.00	\$		496.00	
5.	Lict	all payroll deductions:				_			-
J.			Fo	4	162.00	φ		522.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.			\$_ \$		533.00	-
	5c.	Voluntary contributions for retirement plans	5c.	1		\$-		0.00	-
	5d.	Required repayments of retirement fund loans	5d.			φ_ \$		0.00	-
	5e.	Insurance	5e.			\$		25.00	_
	5f.	Domestic support obligations	5f.	9		\$-		0.00	-
	5g.	Union dues	5g.			\$		0.00	-
	5h.	Other deductions. Specify:	5h.	1		+ \$ -		0.00	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$		\$		558.00	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		\$		938.00	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	•	Ŷ	1,715.00	Ψ_	Σ,	330.00	-
		monthly net income.	8a.	9	0.00	\$_		0.00	_
	8b.	Interest and dividends	8b.	9	0.00	\$_		0.00	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.			\$ \$		0.00	_
	8e.	Social Security	8e.		0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	9	0.00	\$_		0.00	-
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.	,		+ \$		0.00	-
	OII.	Other monthly income. Specify.	_ 011.	T 1	0.00	ΤΨ_		0.00	- ¬
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		0.0	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$.	1,715.00 + \$	2	,938.00	= \$	4,653.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		•				0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					e. 12.	\$	4,653.00
								Combin	ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?						, 11100111 0
		Yes. Explain:							
									<u> </u>

Fill	in this information to identify your case:				
	otor 1 Robert Nelson Martin		Check	c if this is:	
	- Nobel Nobel Markin			An amended filing	
	tor 2 Mary Alondra Martin		_		wing postpetition chapter
(Spo	ouse, if filing)		1	3 expenses as of	the following date:
Unit	ed States Bankruptcy Court for the: DISTRICT OF NEVADA		<u> </u>	MM / DD / YYYY	
Cas	e number 18-17003				
(If k	nown)				
O ¹	fficial Form 106J				
S	chedule J: Your Expenses				12/1
Be	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo nber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
١.					
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	■ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses f	or Separate Househ	nold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include ■ No			-	□ Tes
-	expenses of people other than yourself and your dependents?				
Par Est	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yo	u are using this fo	rm as a sur	polement in a Cha	apter 13 case to report
exp	penses as of a date after the bankruptcy is filed. If this is a supple plicable date.	emental <i>Schedule</i> .	J, check the	box at the top o	f the form and fill in the
	lude expenses paid for with non-cash government assistance if yalue of such assistance and have included it on Schedule I: Yo				
	ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. \$		1,141.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	-	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		25.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as home	e equity loans	5. \$		0.00

		Nelson Martin Iondra Martin	Case num	ber (if known)	18-17003
6.	Utilities:				
	6a. Electricity	y, heat, natural gas	6a.	\$	77.00
	6b. Water, se	ewer, garbage collection	6b.	\$	120.00
	6c. Telephor	e, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
	6d. Other. Sp	pecify:	6d.	\$	0.00
7.		sekeeping supplies	7.	\$	700.00
8.		children's education costs	8.	\$	0.00
9.	•	dry, and dry cleaning	9.	\$	100.00
10.		products and services	10.	\$	100.00
11.			11.	\$	255.00
	Do not include		12.	· ·	300.00
13.	Entertainment	, clubs, recreation, newspapers, magazines, and books	13.	\$	125.00
14.	Charitable con	tributions and religious donations	14.	\$	0.00
15.	Insurance.				
		nsurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insur		15a.	·	0.00
	15b. Health in		15b.	·	0.00
	15c. Vehicle in		15c.	\$	260.00
	15d. Other ins	· · · ·	15d.	\$	0.00
	Specify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.		lease payments:	4-	•	
		nents for Vehicle 1	17a.	·	0.00
		nents for Vehicle 2	17b.	\$	338.00
	17c. Other. Sp	-	17c.	\$	0.00
	17d. Other. Sp	·	17d.	\$	0.00
	deducted from	s of alimony, maintenance, and support that you did not report as your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
19.		ts you make to support others who do not live with you.		\$	500.00
	Specify: child		19.		
20.		perty expenses not included in lines 4 or 5 of this form or on Sch			2.22
		es on other property	20a.	· ·	0.00
	20b. Real esta		20b.		0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		nce, repair, and upkeep expenses	20d.	· -	0.00
0.4		ner's association or condominium dues	20e.	·	0.00
21.	-1 7	Post Petition Attorney Fees	21.		180.00
	pet care			+\$	150.00
	cigarettes			+\$	100.00
22.	Calculate your	monthly expenses			
	22a. Add lines			\$	4,651.00
		22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		2a and 22b. The result is your monthly expenses.		\$	4,651.00
23.	Calculate your	monthly net income.		L	
	-	e 12 (your combined monthly income) from Schedule I.	23a.	\$	4,653.00
		ir monthly expenses from line 22c above.	23b.		4,651.00
	, , , ,	•			.,
		your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	23c.	\$	2.00
_	_				
24.	For example, do y	an increase or decrease in your expenses within the year after y you expect to finish paying for your car loan within the year or do you expect you be terms of your mortgage?			ase or decrease because of a
	■ No.	,			
	☐ Yes.	Explain here:			
	∟ 1 €5.	Explain note.			

Fill in this info	rmation to identify your	case:			
Debtor 1	Robert Nelson Ma	artin			
	First Name	Middle Name	Last Name	_	
Debtor 2	Mary Alondra Ma	rtin			
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States B	Sankruptcy Court for the:	DISTRICT OF NEVADA	A		
Case number	18-17003				
(if known)					☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did you	u pay or agree to pay someone who is NOT an attorney to hel	o you fill out bankruptcy forms?
■ No	0	
☐ Ye	es. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that the	penalty of perjury, I declare that I have read the summary and by are true and correct. Robert Nelson Martin Deert Nelson Martin Deert Nelson 1 Deert January 3, 2019	

Official Form 106Dec

Fill i	n this info	rmation to identify you	r case.			
Debt			_			
Debi	01 1	Robert Nelson N First Name	Middle Name	Last Name		
Debt		Mary Alondra Ma				
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States E	Bankruptcy Court for the:	DISTRICT OF NEVADA			
Case	number	18-17003				
(if kno	wn)				-	Check if this is an imended filing
~ ′′		407				
		orm 107	Affaira far Individ	duala Eilina far D	onkruntov	444
			Affairs for Individ			4/16
infori	nation. If		attach a separate sheet to		equally responsible for sup additional pages, write you	
Part	1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. \	What is yo	our current marital statu	ıs?			
 	■ Marrie	ed arried				
2.	During the	e last 3 years, have you	lived anywhere other than	where you live now?		
ı	■ No					
İ		ist all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
	_	57.00 monuus 7 m <u>e</u> sma, es			oo, roxao, rraog.o ana r	,
	■ No	Asharaman Ciliana Osl		(('a'al Farra 400LI)		
	⊔ Yes. I	viake sure you fill out S <i>cr</i>	nedule H: Your Codebtors (O	пісіаі Form 106H).		
Part	2 Exp	ain the Sources of You	r Income			
ı	Fill in the to	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
İ	_	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,115.00	■ Wages, commissions, bonuses, tips	\$33,873.48
			☐ Operating a business		☐ Operating a business	

Official Form 107

1/03/19 1:52PM

Robert Nelson Martin Debtor 1 18-17003 Debtor 2 Mary Alondra Martin Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$67,253.00 \$7,808.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$57,142.00 \$0.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$1,100.00 \$5,872.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income** Gross income from Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid

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Debtor 1 Robert Nelson Martin 18-17003 Debtor 2 Mary Alondra Martin Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment **Total amount** still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Unknown Plaintiff vs Unknown **BankruptcyChapt** US BKPT CT NV LAS VEGA □ Pending Defendant er7 □ On appeal 0927813MKN □ Concluded Discharged - 0.00 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

	btor 1 Robert Nelson Martin btor 2 Mary Alondra Martin	Case number	(if known) 18-17003	
Pai	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	, did you give any gifts with a total value of more the Describe the gifts	han \$600 per person Dates you gave the gifts	? Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy. ■ No □ Yes. Fill in the details for each gift or contribu	, did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	or gambling? ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose anyt eribe any insurance coverage for the loss	hing because of thef	t, fire, other disaster,
		de the amount that insurance has paid. List pending ance claims on line 33 of <i>Schedule A/B: Property.</i>	loss	lost
	consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	LEGAL SERVICES 732 S. 6th St. Suite 202 Las Vegas, NV 89101 bk@halfpricelawyers.com	Attorney Fees		\$0.00
17.	Within 1 year before you filed for bankruptcy, opromised to help you deal with your creditors. Do not include any payment or transfer that you list. No		or transfer any prope	rty to anyone who
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

	otor 2 Mary Alondra Martin		C	Case number (if known)	18-17003	
	Within 2 years before you filed for bankrup transferred in the ordinary course of your build like the like the properties of transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial af ade as security (such as	fairs? the granting of a se			
	Person Who Received Transfer Address	Description and property transfe		Describe any prop payments received paid in exchange		Date transfer was made
	Person's relationship to you			para in exemange		
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pre No		iny property to a se	elf-settled trust or sir	nilar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	value of the prope	erty transferred		Date Transfer was made
Port	4 9. List of Cartain Financial Accounts In	strumente Sefe Denes	it Payes and Star	aga Unita		
Part	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	sit Boxes, and Stor	age Units		
	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial acco	unts; certificates o			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	t or Date accou closed, sol moved, or transferred	d,	Last balance before closing or transfer
	Wells Fargo Po Box 6995 Portland, OR 97228	XXXX-1407	■ Checking □ Savings □ Money Marke □ Brokerage □ Other	10/17/201 0	8	\$0.00
	Wells Fargo Po Box 6995 Portland, OR 97228	XXXX-9749	☐ Checking ■ Savings ☐ Money Marke ☐ Brokerage ☐ Other	10/17/201 6	8	\$0.00
	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, any	safe deposit box or	other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the contents	•	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	ur home within 1 ye	ear before you filed f	or bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?

Case 18-17003-mkn Doc 16 Entered 01/03/19 13:54:38 Page 47 of 52 1/03/19 1:52PM Debtor 1 Robert Nelson Martin 18-17003 Debtor 2 Mary Alondra Martin Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. п **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation

Official Form 107

Case 18-17003-mkr	Doc 16 Entered 01/03/19	13:54:38 Page 48 of 52
Debtor 1 Robert Nelson Martin Debtor 2 Mary Alondra Martin	c	ase number (if known) 18-17003
■ No. None of the above applies. Go to	Part 12.	
Yes. Check all that apply above and f	ill in the details below for each business.	
Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
institutions, creditors, or other parties. No Yes. Fill in the details below.	ptcy, did you give a financial statement to a	anyone about your business? Include all financial
Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
	a false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
/s/ Robert Nelson Martin	/s/ Mary Alondra Martin	
Robert Nelson Martin	Mary Alondra Martin	
Signature of Debtor 1	Signature of Debtor 2	
Date January 3, 2019	Date	
Did you attach additional pages to <i>Your States</i> No	nent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert Nelson Ma	artin		
	First Name	Middle Name	Last Name	
Debtor 2	Mary Alondra Ma	rtin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number	18-17003			
(if known)	<u></u>			☐ Check if this is a amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	List Your	Creditors	Who Have	Secured	Claims
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1. For any creditors that you listed in Part 1 of Schedule E information below.	ditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the				
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
Creditor's CarMax Auto Finance	Surrender the property.	□ No			
name:	☐ Retain the property and redeem it.	_			
Description of 2010 Mini Cooper 80000 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes			
property Surrendering securing debt:	☐ Retain the property and [explain]:				
Creditor's Santander Consumer USA	☐ Surrender the property.	□ No			
name:	☐ Retain the property and redeem it.				
Description of 2013 VW Passat 77000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes			
property	☐ Retain the property and [explain]:				

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2	Robert Nelson Martin Mary Alondra Martin	Case number (if known)	18-17003
Lessor's na	ame:		□ No
Description Property:	n of leased		□ Yes
Lessor's na			□ No
Property:			☐ Yes
Lessor's na			□ No
Property:	1.51.54354		☐ Yes
Lessor's na			□ No
Property:	i di leased		☐ Yes
Lessor's na			□ No
Property:	i di leased		☐ Yes
Lessor's na			□ No
Property:	i oi leaseu		☐ Yes
Lessor's na			□ No
Property:	i oi leaseu		☐ Yes
Part 3:	Sign Below		
	alty of perjury, I declare that I have indicated my intention about any pat is subject to an unexpired lease.	property of my estate that sec	cures a debt and any personal
		ary Alondra Martin	
		r Alondra Martin ture of Debtor 2	
Date	January 3, 2019 Date	January 3, 2019	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

	Dis	strict of Nevada			
In 1	Robert Nelson Martin Te Mary Alondra Martin		Case No.	18-17003	
	mary Alonara maran	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	ATION OF ATTOI	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	1,800.00	
Prior to the filing of this statement I have received			\$	0.00	
	Balance Due		\$	1,800.00	
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation	tion with any other person	unless they are memb	pers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				
6.	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] Debtor and Attorney entered into two separabankruptcy petition, and a post-petition conschedules and representation at the 341 meduring the bankruptcy and continuing for 12 	nt of affairs and plan which and confirmation hearing, ar ate contracts. A prepet atract with monthly pay teting of creditors and	a may be required; and any adjourned hear stition contract for st tements for the con- continued represe	rings thereof; 50 for the filing of a skeletal appletion of the bankruptcy antation for related matters	
7.	By agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any discharany other adversary proceeding.	es not include the following argeability actions, judi	g service: I cial lien avoidance	es, relief from stay actions or	
	Cl	ERTIFICATION			
this	I certify that the foregoing is a complete statement of any agr bankruptcy proceeding.	reement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
_	January 3, 2019	/s/ Mark Coburn			
	Date	Mark Coburn Signature of Attorne LEGAL SERVICE			

732 S. 6th St. Suite 202 Las Vegas, NV 89101

Name of law firm

702-400-0000 Fax: 702-977-9875 bk@halfpricelawyers.com

United States Bankruptcy Court District of Nevada

In re	Robert Nelson Martin Mary Alondra Martin		Case No.	18-17003
		Debtor(s)	Chapter	7
Γhe abo		ICATION OF CREDITOR the attached list of creditors is true and		of their knowledge.
Date:	January 3, 2019	/s/ Robert Nelson Martin		
		Signature of Debtor		
Date:	January 3, 2019	/s/ Mary Alondra Martin		
•		Mary Alondra Martin		

Signature of Debtor